IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

	For office use only
Indexed	
Audited	
Checked	
Compute	er

Clarinda Correctional Facility	
Name of Department or Office 2000 N. 16th Street	Clarinda, IA 51632
Mailing Address (City, State, Zip Code
Area Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFI	ICE:
Meredith Baker	
Name	
Mailing Address (if different from above)	City, State, Zip (if different from above)
meredith.baker@iowa.gov	712-542-6107
Email Address	Area Code & Telephone Number (if different from above)
DNOR OF GIFT OR BEQUEST:	•
Anonymous	
lame	
Addison Addison	00/12/17
Mailing Address City, State, Zip Code	09/13/17 \$62.91
	Date of Gift or Bequest Amount/Value*
Area Code & Telephone Number	*value is defined as "fair market value" of item as determined by
The state of the s	receiving department or office. If no value mark "0.00".
mail Address (optional)	
Provide a description of the gift or bequest and purpose thereof:	1
	THE MARKET OF A CORNAL STATE
"Gurdians of the Galaxy Vol 2", "The Lion King" an	d "The Mummy" DVD for the CCF Movie Library.
Criteria to use this form:	
Receipt of any gift or bequest that is received by any department of the	state or received by the Governor on behalf of the state.
	,
tement of Affirmation:	
andry Cibba	
affirm that the gift or bequest reported abovessment of the fair market value (if applicable) is correct and true to the	ve is accurate. I further affirm that the information concerning the donor an
. 4	best of my knowledge.
6) II	
	09/13/17
KMI/	
/ Stynature/	Date